							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 09/487233												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							LL (ENTITY	OR	OTHER SMALL E		
FO	R	NUMBE	NUMBER FILED NUMBER EXTRA			RAT	E	FEE		RATE	FEE	
BAS	SIC FEE							345.00	OR		690.00	
TOTAL CLAIMS		10	/minus 20	· 81		X\$	9=		OR	X\$18⇒	1458	
IND	EPENDENT CLAIM	s <i>l</i>	6 minus 3	= 13	·	Х39) = .		OR	X78=	w14	
MULTIPLE DEPENDENT CLAIM PRESENT				<u> </u>	+13	0=		OR	+260=			
* If the difference in column 1 is less than zero, enter *0" in column 2						TOT	AL		OR	'TOTAL'	3162	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							LL	ENTITY	OR	OTHER SMALL E		
ENT A	RI	CLAIMS EMAINING AFTER IENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ſΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total •	00	Minus .	-101		X\$	9=	1	OR	X\$18=		
ME	Independent •	16	Minus	16	=	Х3	9=,		OR	X79€		
Ľ	FIRST PRESENTA	TION OF MU	JLTIPLE DEP	ENDENT CLAIM		+13	کے		OR [.]	+260=	•	
	1 2 A/						STAL		OR	TOTAL		
	(Column 2) (Column 3)						FEE		•			
AMENDMENT B	Я	CLAIMS EMAINING AFTER MENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE	٠.	RATE	ADDI- TIONAL FEE	
	Total •	20	Minus	- 101	. ·	X\$	9≕	į	OR	X\$18=	Ź	
AME	Independent •	1/	Minus	PENDENT CLAIM	7=	ХЗ	9=		OR	X78=		
F	FIRST PRESENTA	TION OF MI	JUIPLE DEF	ENDENI CLAIM		+13	i0=	<i>Y</i> .	OR	+260=		
l	•					ADDIT	OTAL FEE		OR	TOTAL ADDIT. FEE		
ŀ	(Column 1) (Column 2) (Column 3)									-		
STIC		CLAIMS IEMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE	
AMENDMENT	Total •		Minus	**	=	X\$	9=		OR	X\$18=		
NE NE	Independent •		Minus	•••	9	X 3	9= _~		OR	X78=		
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						i0=	· ·	ОЯ	+260=		
* If the entry in column 1 is less than the entry in column 2, writs "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE									OR	TOTAL ADDIT, FEE		
The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3. ADDIT FEE ADDIT FEE												

10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000 10.1000

FORM PTO-870

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